CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Please type or print in ink.

☐ Candidate

A Public Document

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER	
Mayberg	Stephen	·W.	(916) 654-2309	
MAILING ADDRESS STREET (May use business address)	CITY	STATE ZIP CO	DE OPTIONAL: FAX / E-MAIL ADDRESS	
1600 9th Street, Rm. 151	Sacramento	CA 95814	4	
1. Office, Agency, or Cou	ırt	4. Schedule Sui	mmary	
Name of Office, Agency, or Court:		➡ Total number of p	ages 🌙 🚽	
Department of Mental Health		including this cov	er page:	
Division, Board, District, if applica	ble:	➡ Check applicable schedules or "No reportable		
Director's Office		interests."	Interests."	
Your Position:		I have disclosed in attached schedules	terests on one or more of the	
Director		Schedule A-1	Yes – schedule attached	
➡ If filing for multiple positions,	list additional agency(les)/	Investments (Less than	· · · · · · · · · · · · · · · · · · ·	
position(s): (Attach a separat		Schedule A-2	Yes – schedule attached	
Agency: State Independent Livi	ing Council	Investments (10% or gi	reater Ownership)	
Position: Member		Schedule B 🗵 Real Property	Yes – schedule attached	
2. Jurisdiction of Office	(Check at least one box)	Schedule C Income, Loans, & Bu	Yes schedule attached siness Positions (Income Other than Gifts	
⊠ State		Schedule D	Yes - schedule attached	
County of		Income - Gifts		
☐ City of		Schedule E		
☐ Multi-County				
Other			-or-	
		☐ No reportable in	nterests on any schedule	
3. Type of Statement (ch	neck at least one box)			
Assuming Office/Initial	Date:/	5. Verification		
Annual: The period covered	is January 1, 2007,	I have used all rea	isonable diligence in preparing this	
through December 31, 2007.		statement. I have rev	iewed this statement and to the best of	
O The period covered is	//_tthrough	my knowledge the in attached schedules is	formation contained herein and in any strue and complete.	
December 31, 2007.		l contitution and the manual of	ar of navium, under the laws of the State	
Leaving Office Date Left:/(Check one)		I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		
O The period covered is Jan	uary 1, 2007, through the		3-5-08	
date of leaving office.		Date Circums		
O The period covered is	// through			
the date of leaving office.	unough	Sigr		

FPPC Form 700 (2007/2008) FPPC Toll-Free Helpline: 866/ASK-FPPC

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

FPPC Form 700 (2007/2008)
FPPC Toll-Free Helpline: \$66/ASK-FPPC

COVER PAGE

Please type or print in ink.

A Public Document

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
Mayberg	Stephen	W.	(916) 654-2309
MAILING ADDRESS STREET (May use business address)	CITY	STATE ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRESS
1600 9th Street, Rm. 151	Sacramento	CA 95814	
1. Office, Agency, or Cou	rt	4. Schedule Summ	ary
Name of Office, Agency, or Court:		Total number of pages	•
Gov.'s Comm. on Employment	of People w/Disabilities	including this cover pa	ige: <u>5</u>
Division, Board, District, if applicab	le:	Check applicable sche interests."	dules or "No reportable
Your Position:		I have disclosed interest attached schedules:	s on one or more of the
Ex-officio member		Schedule A-1 🔀 Yes -	- schedule attached
If filing for multiple positions, li position(s): (Attach a separate		Investments (Less than 10% C	I
Agency: CDCR Re-entry Adviso		Schedule A-2 X Yes - Investments (10% or greater 0	" "
Position: Committee Member		Schedule B 🔀 Yes - Real Property	- schedule attached
2. Jurisdiction of Office (Check at least one box)		- schedule attached 5 Positions (Income Other than Gifts
State		Schedule D TYes	- schedule attached
County of		Income - Gifts	
☐ City of			- schedule attached
☐ Multi-County		Income - Travel Payments	
Other		-1	or-
3. Type of Statement (Ch	ack at least one hov	No reportable interes	sts on any schedule
	·		
1	ate:/	5. Verification	
Annual: The period covered is through December 31, 2007.	s January 1, 2007,	I have used all reasons	ble diligence in preparing this
-or-		my knowledge the informa	ation contained herein and in any
O The period covered is December 31, 2007.	_/, through	attached schedules is true	i
Leaving Office Date Left: (Check one)			erjury under the laws of the State egoing is true and correct.
O The period covered is Janu date of leaving office.	ary 1, 2007, through the	Date S	3-5-08
-or-			
O The period covered is the date of leaving office.	_/, through	Signat	orginal actionion quarty spir spiring smeamy
☐ Candidate			

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Name

Stephen W. Mayberg, Ph.D.

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

	> NAME OF BUSINESS ENTITY
NESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
\$10,001 - \$100,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT
Describe)	Other(Describe)
	IF APPLICABLE, LIST DATE:
/ 07 OSED	
	> NAME OF BUSINESS ENTITY
NESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
\$10,001 - \$100,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT Stock
Describe)	Other (Describe)
	IF APPLICABLE, LIST DATE:
J 07 OSED	
	> NAME OF BUSINESS ENTITY
NESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
] \$10,001 - \$100,000] Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT Stock
Describe)	Other(Describe)
•	IF APPLICABLE, LIST DATE:
	\$10,001 - \$100,000 Over \$1,000,000 Pescribe) / 07 DSED NESS ACTIVITY \$10,001 - \$100,000 Over \$1,000,000 NESS ACTIVITY \$10,001 - \$100,000 Over \$1,000,000

SCHEDULE A-2 Investments, Income, and Assets

of Business Entities/Trusts (Ownership Interest is 10% or Greater) CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Name

Stephen W. Mayberg, Ph.D.

FPPC Toll-Free Helpline: 866/ASK-FPPC

➤ 1. BUSINESS ENTITY OR TRUST	➤ 1. BUSINESS ENTITY OR TRUST
Stephen W. Mayberg, Ph.D.	
Name	Name
Address	Address
Address Check one	Check one
☐ Trust, go to 2 ☑ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$\infty \\$ \\$2,000 - \\$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Sole Proprietorship Partnership Other	Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION Owner	YOUR BUSINESS POSITION
> 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499	> 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499
INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)	INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)
➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	> 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
INVESTMENT REAL PROPERTY	INVESTMENT REAL PROPERTY
Name of Business Entity <u>or</u> Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity <u>or</u> Street Address or Assessor's Parcel Number of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 / / 07 / / 07	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
] Leasehold Other	Leasehold Other
Yrs. remaining Check box if additional schedules reporting investments or real property are attached	Yrs, remaining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2007/2008) Sch. A-2

Comments:..

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Name

Stephen W. Mayberg, Ph.D.

STREET ADDRESS OR PRECISE LOCATION	> STREET ADDRESS OR PRECISE LOCATION
CITY	CITY
Carnelian Bay, California	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
X \$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
☑ Ownership/Deed of Trust ☐ Easement	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	S0 - \$499 S500 - \$1,000 S1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000	☐ \$10,001 - \$100,000 ☐ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
You are not required to report loans from commercial of a retail installment or credit card transaction, made	in the lender's regular course of business on terms
You are not required to report loans from commercial of a retail installment or credit card transaction, made	our official status. Personal loans and loans received
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to y	in the lender's regular course of business on terms your official status. Personal loans and loans received
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to you not in a lender's regular course of business must be	in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to you not in a lender's regular course of business must be	in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to ynot in a lender's regular course of business must be a	in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows: NAME OF LENDER*
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to ynot in a lender's regular course of business must be an NAME OF LENDER*	in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows: NAME OF LENDER* ADDRESS
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to ynot in a lender's regular course of business must be an NAME OF LENDER*	in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows: NAME OF LENDER* ADDRESS
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to ynot in a lender's regular course of business must be an NAME OF LENDER* ADDRESS BUSINESS ACTIVITY OF LENDER	in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows: NAME OF LENDER* ADDRESS BUSINESS ACTIVITY OF LENDER
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to ynot in a lender's regular course of business must be a NAME OF LENDER* ADDRESS BUSINESS ACTIVITY OF LENDER INTEREST RATE TERM (Months/Years)	in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows: NAME OF LENDER* ADDRESS BUSINESS ACTIVITY OF LENDER INTEREST RATE TERM (Months/Years)
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to ynot in a lender's regular course of business must be a NAME OF LENDER* ADDRESS BUSINESS ACTIVITY OF LENDER INTEREST RATE TERM (Months/Years)	in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows: NAME OF LENDER* ADDRESS BUSINESS ACTIVITY OF LENDER INTEREST RATE Wone None
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to ynot in a lender's regular course of business must be a NAME OF LENDER* ADDRESS BUSINESS ACTIVITY OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD	in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows: NAME OF LENDER* ADDRESS BUSINESS ACTIVITY OF LENDER INTEREST RATE Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to ynot in a lender's regular course of business must be an NAME OF LENDER* ADDRESS BUSINESS ACTIVITY OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD \$1,001 - \$1,000	in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows: NAME OF LENDER* ADDRESS BUSINESS ACTIVITY OF LENDER INTEREST RATE Mone HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000

STATEMENT OF ECONOMIC INTERESTS

Date Received Official Use Only

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Dolezal Elizabeth Ann 1916 541-2739 MAILING ADDRESS STREET CITY STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS	пеазе суре огринк иг ник.			
Askedule Summary	NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
Askedule Summary	holezal	Elizabeth	Ann	1916) 541-2739
Name of Office, Agency, or Court: SSUPD Division, Board, District, if applicable: CALT Health Char Under Core Roles (Court of the attached Active Schedule Schedules or "No reportable Interests." I have disclosed interests on one or more of the attached schedules: Schedule A-1	MAILING ADDRESS STREET (May use business address)	CITY	STATE ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRESS
Name of Office, Agency, or Court: SSUPD Division, Board, District, if applicable: CALT Health Char Under Core Roles (Court of the attached Active Schedule Schedules or "No reportable Interests." I have disclosed interests on one or more of the attached schedules: Schedule A-1				
Name of Office, Agency, or Court: SSUPD Division, Board, District, if applicable: CALT Health Char Under Core Roles (Court of the attached Active Schedule Schedules or "No reportable Interests." I have disclosed interests on one or more of the attached schedules: Schedule A-1				
Division, Board, District, if applicable: Cartif Heathman Cartifora Cortifora Co			4. Schedule Summa	ry
Calif Heathcase Workforce folicetions Commission Commission Member			Total number of pages including this cover page	ge: <u>2</u>
Calif Heathcase Workforce folicetions Commission Commission Member	Division, Board, District, if applicable:		- Charle applicable cales	lulas au filia maartahla
The period covered is		ree Police Com		inies of "Mo Jahottanie.
## If filing for multiple positions, list additional agency(les) position(s): (Attach a separate sheet if necessary.) Agency: Position: Position: Position:	Your Position:		* *************************************	on one or more of the
Agency:			Schedule A-1 Yes -	schedule attached
Agency: Position: 2. Jurisdiction of Office (Check at least one box) Schedule C Yes - schedule attached Real Property Schedule D Yes - schedule attached Real Property Real Property Schedule D Yes - schedule attached Real Property Real	If filing for multiple positions, list addition position(s): (Attach a separate sheet i	onal agency(ies)/	Investments (Less than 10% O	mership)
Position:				
Position:	Agency:		<u></u>	
2. Jurisdiction of Office (Check at least one box) State	Position:			schedule attached
State	2. Jurisdiction of Office (Check a	nt least one box)	Income, Loans, & Business	schedule attached Positions (income Other than Gitts
County of				
Multi-County	County of			· schedule attached
Multi-County	☐ City of		Schedule E Yes -	. schadula attached
3. Type of Statement (Check at least one box) □ Assuming Office/Initial □ Date:/ Annual: The period covered is January 1, 2007, through December 31, 2007. □ The period covered is/, through December 31, 2007. □ Leaving Office Date Left:/, through Check one) □ The period covered is January 1, 2007, through the date of leaving office. □ The period covered is January 1, 2007, through the date of leaving office. □ The period covered is January 1, 2007, through the date of leaving office. □ The period covered is January 1, 2007, through the date of leaving office. □ The period covered is January 1, 2007, through the date of leaving office. □ The period covered is January 1, 2007, through the date of leaving office. □ Signature Interests on any schedule	Multi-County		· · · · · · · · · · · · · · · · · · ·	CONTOURING SERVICES
3. Type of Statement (Check at least one box) Assuming Office/Initial Date:/ Annual: The period covered is January 1, 2007, through December 31, 2007. O The period covered is/, through December 31, 2007. Leaving Office Date Left:/, through Check one) O The period covered is January 1, 2007, through the date of leaving office. O The period covered is/, through the date of leaving office. O The period covered is/, through the date of leaving office. O The period covered is/, through the date of leaving office. O The period covered is/, through the date of leaving office. Signature	☐ Other		0	ir-
3. Type of Statement (Check at least one box) Assuming Office/Initial Date:/ Annual: The period covered is January 1, 2007, through December 31, 2007. O The period covered is/, through December 31, 2007. Leaving Office Date Left:/, through Check one) O The period covered is January 1, 2007, through the date of leaving office. O The period covered is/, through the date of leaving office. O The period covered is/, through the date of leaving office. O The period covered is/, through the date of leaving office. O The period covered is/, through the date of leaving office. Signature			No reportable interes:	s on any schedule
Annual: The period covered is January 1, 2007, through December 31, 2007. OThe period covered is/, through December 31, 2007. Leaving Office Date Left:/, (Check one) O The period covered is January 1, 2007, through the date of leaving office. OThe period covered is/, through the date of leaving office. Signature 5. Verification I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date Signed Signature	3. Type of Statement (Check at It	east one box)	[] no reparable another	is on any constant
Annual: The period covered is January 1, 2007, through December 31, 2007. O The period covered is/, through December 31, 2007. Leaving Office Date Left:/, through Check one) O The period covered is January 1, 2007, through the date of leaving office. O The period covered is/, through the date of leaving office. O The period covered is/, through the date of leaving office. Signature	Assuming Office/initial Date:	<i></i>	r Vanidiandian	
through December 31, 2007. -Or- O The period covered is	Annual: The period covered is Januar	y 1, 2007,		
O The period covered is	through December 31, 2007.			
December 31, 2007. Leaving Office Date Left:/	**		my knowledge the informa	tion contained herein and in any
Leaving Office Date Left:		through		·
O The period covered is/, through the date of leaving office. Date Signed 3-31-88 (month, day, year) Signature		<i></i>		
O The period covered is/, through the date of leaving office.	O The period covered is January 1, 2	007, through the		DP .
O The period covered is/, through the date of leaving office. Signature	*		Date Signed <u>U-U/-</u>	(month, day, year)
Gar,)	O The period covered is//	, through	Signature	
			V	icial,)

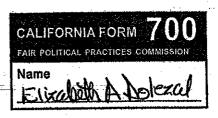
FPPC Form 700 (2007/2008)
FPPC Toll-Free Helpline: 866/ASK-FPPC

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.



NAME OF BUSINESS ENTITY	> NAME OF BUSINESS ENTITY
Microsoft	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computer Industry Firm	
FAIR MARKET VALUE	FAIR MARKET VALUE
☑\$2,000 - \$10,000 ☐ \$10,001 - \$100,000 ☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,000 \$1,000,000
NATURE OF INVESTMENT Stock	NATURE OF INVESTMENT Stock
Other (Describe)	Other (Describe)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	/ / 04 / / 04 ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY PEXEC TOC	> NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
thormacoutical Firm	
FAIR MARKET VALUE	FAIR MARKET VALUE
£2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock	NATURE OF INVESTMENT Stock
Other (Describe)	Other (Describe)
if Applicable, list date:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	/ / 04 / / 04 ACQUIRED DISPOSED
> NAME OF BUSINESS ENTITY	> NAME OF BUSINESS ENTITY
Seliaman Communications	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
· · · · · · · · · · · · · · · · · · ·	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000	
NATURE OF INVESTMENT Stock	NATURE OF INVESTMENT Stock
· • • • • • • • • • • • • • • • • • • •	
Other (Describe)	Other (Oescribe)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ / 04 / 04
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	